

Nov 16 1:35a

perbiz.com

2422818

P12000095768

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000272899 3)))



H120002728993ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CSH SERVICES, LLC
Account Number : F20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Citrus Springs Pharmacy, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

RECEIVED
12 NOV 16 AM 11:33
TALLAHASSEE FLORIDA

FILED
12 NOV 16 AM 11:22

STATE DEPT OF STATE
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

11/19/12

H12000272899 3

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CITRUS SPRINGS PHARMACY, INC.

ARTICLE II ADDRESS

The principal place of business is:

10489 N FLORIDA AVENUE UNIT A
CITRUS SPRINGS, FLORIDA 34434

The mailing address is:

1515 SILVER HILL COURT
STONE MOUNTAIN, GEORGIA 30087

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT
OSARHIEME IGBINOBA OKOJIE
1515 SILVER HILL COURT
STONE MOUNTAIN, GEORGIA 30087

12 NOV 16 AM 11:22

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

H12000272899 3

H12000272899 3

PAGE 2 CITRUS SPRINGS PHARMACY, INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

OSARHIEME IGBINOBA OKOJIE
10489 N FLORIDA AVENUE UNIT A
CITRUS SPRINGS, FLORIDA 34434

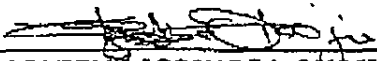
ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:


OSARHIEME IGBINOBA OKOJIE
1515 SILVER HILL COURT
STONE MOUNTAIN, GEORGIA 30087

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 NOV 16 AM 11:22

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


OSARHIEME IGBINOBA OKOJIE / Registered Agent

11/15/2012
Date


OSARHIEME IGBINOBA OKOJIE / Incorporator

11/15/2012
Date

H12000272899 3